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DESIGN PATENT APPLICATION (37 CFR 1.63)

OR

□ Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

	OOCSO 510 CTD			
Attorney Docket Number	or 00689-519-CIP			
First Named Inventor	Sanicola-Nadel et al.			
COMPLETE	IF KNOWN			
Application Number	09/187,906			
Filing Date	November 6, 1998			
Group Art Unit	1642			
Examiner Name	Alana M. Harris			

-										
	As a below named inventor, I hereby declare that:									
	My residence, mailing address, and citizenship are as stated below next to my name.									
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	RET LIGAND RET L FOR STIMULATING NEURAL AND RENAL GROWTH									
	(Title of the Invention)									
	the specification of which									
	is attached hereto	•								
	OR		as United S	States Application I	Number or PCT International					
	was filed on (MM/DD/YYYY)	November 6, 1	998	•						
	Application Number 09/18	7,906 and was a	mended on (MM/DD/Y)	m	(If applicable).					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
	I acknowledge the duty to disclosin-part applications, material infor PCT international filing date of the	e information which is n mation which became a continuation-in-part ap	naterial to patentability a valiable between the fili plication.	is defined in 37 CF ng date of the prio	R 1.56, including for continuation- r application and the national or					
	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
	PCT/US97/07726	USA	05/07/1997							
	101/05///07/20	USA	05/07/1997							
	•	•								
	☐ Additional foreign application	numbers are listed on a	supplemental priority d	ata sheet PTO/SB	/02B attached hereto:					
	I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
	Application Number(s)	Filing Dat	e (MM/DD/YYYY)	(S)						
	60/017,427	05	/08/1996	Addition	al provisional application					
	60/019,300	06	/07/1996	numbers are listed on a supplemental priority data sheet						
	60/021,859		/16/1996	PTO/SB/02B attached hereto.						
	00/021,007	.07	110/1770							

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below								
Name Gary L. Creason, Reg. No. 34,310								
Address BIOGEN, INC.								
Address 14 Cambridge Cent	er							
City Cambridge	,			State	MA	ZIP 02142		
Country USA		Telephone		679-230	8	Fax (617) 679-2838		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INV	ENTOR:	`		A petiti	on has been fil	ed for this unsigned inventor		
Given Name Michele (first and middle [if any])	. . .			Family I		Sanicola-Nadel		
Inventor's Michell Lanicola nadel Date 3/3/03								
Residence: City Winchester State MA Country USA Citizenship US								
Malling Address								
Mailing Address 4 Maple Ro	oad .	-						
City	State	MA	•	ZIP	01890	USA		
NAME OF SECOND INVENTOR	:		0	A petiti	on has been fi	led for this unsigned inventor		
Given Name Catherine Family Name Hession (first and middle [if any]) or Surname								
Inventor's Catherine Hessian Date 2/25/03								
Hingham Resklence: City			State	MA	Country USA	Citizenship		
Mailing Address	•							
35 Otis Hill Road Malling Address								
City Hingham	State	MA		ZIP	02043	Country USA		
Additional inventors are being named		suppleme	ntal Additio		tor(s) sheet(s) PT	O/SB/02A attached hereto.		

Please type a plus sign (+) inside this box ->

PTO/SBA02A (3-97)
sign (+) inside this box

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na		Family Name or Surname								
Richard L.				Cate						
Inventor's Signature	Relad	Y	at	t				Date		/19/03
Residence: City	Cohasset	State	MA	c	ountry	USA		Citizens	nlp	US
Post Office Address										
Post Office Address	21 College Hill Road	1				·		·		
City	Cohasset	State	MA		ZIP	02025	Countr	у	US.	A.
Name of Addition	nal Joint Inventor, if any	/ :			\ petitio	n has been fi	led for th	ils unsign	ed inv	entor
Given Name (first and middle [if any]) Family Name or Surname										
	Dane S. Worley						еу			
Inventor's Signature	Dave & M				Date 2.21.03				2.21.03	
Residence: City	Somerville	State	MA	c	ountry	USA	USA		ship	us
Post Office Address										
Post Office Address	21 College Hill Road									
City	Somerville	State	MA		ZIP -	02144	Cou	ntry	Ţ	JSA
Name of Addition	nal Joint Inventor, if an	y:			A petitio	n has been fi	led for th	nis unsigr	ed inv	rentor
Given Na	me (first and middle [if any])					Family N	arne or	Sumame		
		-								
triventor's Signature			÷					Da	te	
Residence: City		State		c	ountry			Citize	nship	
Post Office Address										:
Post Office Address					1	-	·			· · · · · · ·
City		State			ZIP			Country		

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applic	ations:								
Prior Foreign Application Number(s)	Country		Foreign Filing Date (MM/DD/YYYY)		Priority Not Claimed	Certified Copy Attached? YES NO			
					000000000000000	00000000000000	000000000000000		
Additional provisional applications: Application Number				Filing Date (MM/DD/YYYY)					
60/023,444 60/043,533				08/23/1996 04/11/1997					
Additional U.S. applicati	I			<u> </u>					
U.S. Parent Application Number	tion	PCT Paren Number	ıt	Parent F (MM/D	filing Date D/YYYY)	Parent Patent Number (if applicable)			
		·							

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DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number		
Raymond G. Arner	32,958	Gary L. Creason	34,310		
John T. Li	44,210	Timothy P. Linkkila	40,702		
Niki D. Cox	42,446	Allan A. Brookes	36,373		
Ivor R. Elrifi	39,529	Scott D. Miller	43,803		
Gregory J. Sieczkiewicz	48,223				
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